

UTAH DEPARTMENT OF HEALTH, PRIOR AUTHORIZATION REQUEST FORM

**STIMULANTS FOR ADULTS**

(amphetamines, atomoxetine, dextroamphetamines, lisdexsamphetamine,  
methamphetamines, methylphenidates and dexamethylphenidates)

**PLEASE SEE THE "ZENZEDI" FORM FOR ZENZEDI REQUESTS**

Patient name: \_\_\_\_\_ Medicaid ID #: \_\_\_\_\_

Prescriber Name: \_\_\_\_\_ Prescriber NPI#: \_\_\_\_\_ Contact person: \_\_\_\_\_

Prescriber Phone#: \_\_\_\_\_ Extension/Option: \_\_\_\_\_ Fax#: \_\_\_\_\_

Pharmacy: \_\_\_\_\_ Pharmacy Phone#: \_\_\_\_\_ Pharmacy Fax #: \_\_\_\_\_

Requested Medication: \_\_\_\_\_ Strength: \_\_\_\_\_ Frequency/Day: \_\_\_\_\_

**All information to be legible, complete and correct or form will be returned**

**FAX DOCUMENTATION FROM PROGRESS NOTES TO 855-828-4992**

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**WHEN PRESCRIBED FOR ADULTS only the following diagnoses are covered:**

ADD/ADHD, narcolepsy, organic brain syndrome, traumatic brain injury, treatment resistant depression, severe sedation due to chemotherapy medications, severe sedation due to psychotropic medications, or mental retardation if patient exhibits injurious behavior and/or hyperactivity

**ADD or ADHD:**

- A letter of medical necessity stating the current diagnosis, current treatment, and any past or present substance abuse problems.
- A copy of the testing that has been done to make the diagnosis for adult ADD: Psychiatric Evaluation that shows the Axis 1 diagnosis of ADD, **OR** a copy of a completed Wender or Epstein rating scale, **OR** Criteria from the current DSM that has been met.

**ALL OTHER DIAGNOSES:**

- A letter of medical necessity explaining the patient's diagnosis and situation.
- A statement documenting any substance abuse problems past, present or no history.

**NOTES:**

- The Daytrana patch is not FDA indicated for adults, and Medicaid will not cover it past the age of 18.
- Please see the Zenzedi form for Zenzedi requests.

**AUTHORIZATION:**

1 year

**RE-AUTHORIZATION:** (Starting at age 19)

Letter of medical necessity explaining the patient's diagnosis and situation, including a statement regarding any current substance abuse issues.